

Communications Committee



Media Assist Request Form

Contact: Julie Mortimore, Chair Support
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(760) 900-8535 cell
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Today's Date: _____

Subcommittee
Name: _____

Contact: _____

Wk. Phone: _____

Cell Phone: _____

Email: _____

Event: _____

Description of Event: _____

**Please check all target populations that
apply for the event:**

- ☐ All FSNE populations
- ☐ African American FSNE
- ☐ Latino FSNE
- ☐ FSNE children and their family
- ☐ Intermediates to FSNE population
- ☐ Public or elected officials
- ☐ Faith-based organizations
- ☐ City/County Dept., i.e. Police
- ☐ Other: _____

Please check time period requested:

- ☐ Submit Jan. 15th - March 1st Coverage
- ☐ Submit Feb. 15th - April 1st Coverage
- ☐ Submit March 15th - May 1st Coverage
- ☐ Submit April 15th - June 1st Coverage
- ☐ Submit May 15th - July 1st Coverage
- ☐ Submit June 15th - Aug. 1st Coverage
- ☐ Submit July 15th - Sept. 1st Coverage
- ☐ Submit Aug. 15th - Oct. 1st Coverage
- ☐ Submit Sept. 15th - Nov. 1st Coverage
- ☐ Submit Oct. 15th - Dec. 1st Coverage
- ☐ Submit Nov. 15th - Jan. 1st Coverage
- ☐ Submit Dec. 15th (07) - Feb. 1st Coverage (08)

Event date including year: _____

Type of media coverage sought:

- ☐ Pre event announcement with logistics only to promote attendance.
- ☐ Pre event coverage to do an article or report.
- ☐ Post event announcement to make public aware that the event took place.
- ☐ Post event coverage to do an article or report.
- ☐ Other: _____



DESERT SIERRA HEALTH NETWORK COMMUNICATION COMMITTEE

Type of communication medium preferred:

- ☐ Large, local newspaper, i.e. Press Enterprise or the San Bernardino County Sun
- ☐ Small, regional newspaper, i.e. Fontana Herald or Adelanto Bulletin
- ☐ Ethnically oriented newspaper or magazine, i.e. Westside Story newspaper or Hispanic Life Mag
- ☐ Opt Ed article in newspaper, newsletter, magazine, or other printed item
- ☐ Ethnically oriented radio stations, i.e. Radio Mexico
- ☐ Public access television
- ☐ Local TV channel, i.e. Fox 11 news
- ☐ Professional or group specific newsletter (School Nurse, School Districts, PHN, etc.)
- ☐ Mass email blast to other health oriented organizations
- ☐ Flyer sent by good, old fashion U.S. Postal Service
- ☐ Other: _____

Please list the exact name/s of sponsoring organizations:

Please list the exact name/s and titles of VIPS to be recognized:

Describe logos, graphics, tables, charts, photos, etc. that can supplement the text and state the electronic format for these images (i.e. jpeg, PDF, Word doc):

DESERT SIERRA HEALTH NETWORK COMMUNICATION COMMITTEE

Please give the name, credentials, title, organization, and contact information for media spokespersons that are available to speak to the media about this event:

If there is a communications agency, other than Brown & Miller, that has been contracted to do media promotions in conjunction with the event, please state the name of the agency and provide contact information for the person representing the agency:

Describe activities or actions that can be used for "photo ops":

Please share any other facts, questions, concerns, comments or general suggestions:
